

# Best Available Copy

ISSUE SLIP STAMP PAPER  
for additional references

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BX	709	11/6/95
O.I.P.E. CLASSIFIER	BR	32	11/10/95
FORMALITY REVIEW		(085904)	12/14/95

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
20	17/03/95
21	17/03/95
22	17/03/95
23	17/03/95
24	17/03/95
25	17/03/95
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Claim	Date
Final	
Original	
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Claim	Date
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Original	
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If more than 150 claims or 10 actions  
staple additional sheet here

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